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06 UNITED STATES DISTRICT COURT  
07 WESTERN DISTRICT OF WASHINGTON  
AT SEATTLE

08 BARBARA A. KOLVICK, )  
09 Plaintiff, ) CASE NO. C10-1804-JCC  
10 v. )  
11 MICHAEL J. ASTRUE, Commissioner ) REPORT AND RECOMMENDATION  
of Social Security, ) RE: SOCIAL SECURITY DISABILITY  
12 Defendant. ) APPEAL  
13 \_\_\_\_\_ )

14 Plaintiff Barbara A. Kolvick proceeds through counsel in her appeal of a final decision  
15 of the Commissioner of the Social Security Administration (Commissioner). The  
16 Commissioner denied plaintiff's applications for Supplemental Security Income (SSI) and  
17 Disability Insurance Benefits (DIB) after a hearing before an Administrative Law Judge (ALJ).  
18 Having considered the ALJ's decision, the administrative record (AR), and all memoranda of  
19 record, the Court recommends that this matter be REMANDED for further administrative  
20 proceedings.

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01 **FACTS AND PROCEDURAL HISTORY**

02 Plaintiff was born on XXXX, 1962.<sup>1</sup> She completed her GED (AR 32) and previously  
03 worked as a general clerk, cook, data clerk, order picker, and maid/housekeeper (AR 70-71.)

04 Plaintiff filed applications for DIB and SSI in February 2008, alleging disability  
05 beginning March 1, 2006. (AR 171, 174.)<sup>2</sup> Her date last insured for DIB is December 31,  
06 2010. (AR 11.) Plaintiff's applications were denied at the initial level and on  
07 reconsideration, and she timely requested a hearing.

08 ALJ Mattie Harvin-Woode held a hearing on January 21, 2010 and took testimony from  
09 plaintiff and a vocational expert (VE). (AR 27-80.) On April 16, 2010, the ALJ issued a  
10 decision finding plaintiff not disabled. (AR 9-19.)

11 Plaintiff timely appealed. The Appeals Council, on July 16, 2010, denied plaintiff's  
12 request for review (AR 1-5), making the ALJ's decision the final decision of the Commissioner.  
13 Plaintiff appealed this final decision of the Commissioner to this Court.

14 **JURISDICTION**

15 The Court has jurisdiction to review the ALJ's decision pursuant to 42 U.S.C. § 405(g).

16 **DISCUSSION**

17 The Commissioner follows a five-step sequential evaluation process for determining  
18 whether a claimant is disabled. *See* 20 C.F.R. §§ 404.1520, 416.920. At step one, it must be

19 \_\_\_\_\_  
20 1 Plaintiff's date of birth is redacted back to the year of birth in accordance with Federal Rule of  
21 Civil Procedure 5.2(a) and the General Order of the Court regarding Public Access to Electronic Case  
22 Files, pursuant to the official policy on privacy adopted by the Judicial Conference of the United States.

2 The Commissioner denied earlier applications. (AR 88.) Although plaintiff originally  
argued that the ALJ de facto opened the initial denial of her prior applications, she withdrew this  
argument in her reply. (*See* Dkts. 18 & 23.)

01 determined whether the claimant is gainfully employed. The ALJ found that plaintiff had not  
02 engaged in substantial gainful activity (SGA) during the period at issue. She noted that  
03 plaintiff's 2007 and 2008 work in "maid services" did not rise to the level of SGA. (AR 11.)  
04 At step two, it must be determined whether a claimant suffers from a severe impairment. The  
05 ALJ found plaintiff's dysthymia, bipolar disorder, posttraumatic stress disorder, borderline and  
06 histrionic personality traits, and polysubstance abuse including benzodiazepine dependence  
07 severe. She found other impairments, including diagnoses of Bell's palsy, chronic obstructive  
08 pulmonary disease (COPD)/asthma, headaches, and knee problems not severe.

09 Step three asks whether a claimant's impairments meet or equal a listed impairment.  
10 The ALJ found plaintiff did not have an impairment or combination of impairments that met or  
11 medically equaled a listing. She completed the "Psychiatric Review Technique" (PRT) or  
12 "special technique" by assessing the degree and severity of functional limitations resulting from  
13 plaintiff's mental impairments. 20 C.F.R. §§ 404.1520a(c),(d), 416.920a(c),(d). She found  
14 mild restriction in activities of daily living, moderate difficulties in social functioning and with  
15 regard to concentration, persistence, or pace, and no extended episodes of decompensation.

16 If a claimant's impairments do not meet or equal a listing, the Commissioner must  
17 assess residual functional capacity (RFC) and determine at step four whether the claimant has  
18 demonstrated an inability to perform past relevant work. The ALJ assessed plaintiff as able to  
19 perform the full range of work at all exertional levels, but with the following nonexertional  
20 limitations: she can perform simple and some detailed tasks; she is limited to minimal  
21 interaction with the general public; and she must avoid concentrated exposure to fumes and  
22 gases. With this RFC, the ALJ found plaintiff able to perform her past relevant work as a

01 maid/housekeeper and order picker.

02       If a claimant demonstrates an inability to perform past relevant work, the burden shifts  
03 to the Commissioner to demonstrate at step five that the claimant retains the capacity to make  
04 an adjustment to work that exists in significant levels in the national economy. Finding  
05 plaintiff not disabled at step four, the ALJ did not proceed to step five.

06       This Court's review of the ALJ's decision is limited to whether the decision is in  
07 accordance with the law and the findings supported by substantial evidence in the record as a  
08 whole. *See Penny v. Sullivan*, 2 F.3d 953, 956 (9th Cir. 1993). Substantial evidence means  
09 more than a scintilla, but less than a preponderance; it means such relevant evidence as a  
10 reasonable mind might accept as adequate to support a conclusion. *Magallanes v. Bowen*, 881  
11 F.2d 747, 750 (9th Cir. 1989). If there is more than one rational interpretation, one of which  
12 supports the ALJ's decision, the Court must uphold that decision. *Thomas v. Barnhart*, 278  
13 F.3d 947, 954 (9th Cir. 2002).

14       Plaintiff asserts that she did not have past relevant work as a housekeeper, as recognized  
15 by the ALJ's own finding that that work did not rise to the level of SGA. (AR 11); 20 C.F.R.  
16 §§ 404.1560(b)(1), 404.1565(a), 416.960(b)(1), 416.965(a). Plaintiff further argues that the  
17 ALJ gave a deficient hypothetical to the VE in not including her moderate difficulties in  
18 concentration, persistence, or pace, that the ALJ erroneously evaluated the opinions of two  
19 physicians and failed to evaluate the side effects of her medication, that the step four decision  
20 was deficient, and that the ALJ made mistakes of fact in relation to her knee condition. She  
21 requests remand for further administrative proceedings.

22       The Commissioner does not take issue with the contention that plaintiff's work as a

01 maid/housekeeper does not constitute past relevant work. Accordingly, the Court need only  
02 consider the ALJ's finding as to the order picker job. The Commissioner otherwise argues that  
03 the ALJ's decision is supported by substantial evidence and should be affirmed.

04 Moderate Difficulties in Concentration, Persistence, or Pace

05 Plaintiff notes that neither the RFC assessment, nor the corresponding hypothetical to  
06 the VE included the ALJ's step two and three conclusion as to plaintiff's moderate difficulties  
07 in concentration, persistence, or pace. She argues that the restriction to "simple and some  
08 detailed tasks" in the RFC assessment (AR 14) and to "simple tasks and some complex tasks[]"  
09 in the hypothetical (AR 71) does not *ipso facto* or reasonably account for the moderate  
10 limitation assessed. *See, e.g., Thomas*, 278 F.3d at 956 (recognizing that an ALJ's  
11 hypothetical should account for deficits in concentration, persistence, or pace); *Winschel v.*  
12 *Comm'r of Soc. Sec.*, 631 F.3d 1176, 1180-81 (11th Cir. 2011) (concluding that a hypothetical  
13 should either explicitly include or implicitly account for limitations in concentration,  
14 persistence, and pace identified during the step two and three PRT); *O'Connor-Spinner v.*  
15 *Astrue*, 627 F.3d 614, 619-20 (7th Cir. 2010) ("[F]or most cases, the ALJ should refer expressly  
16 to limitations on concentration, persistence and pace in the hypothetical in order to focus the  
17 VE's attention on these limitations and assure reviewing courts that the VE's testimony  
18 constitutes substantial evidence of the jobs a claimant can do.") Plaintiff notes that the VE in  
19 this case stated that she did not consider any deficit in concentration when answering the ALJ's  
20 hypothetical. (AR 76-77.)

21 The Commissioner distinguishes the broad functional limitations as assessed in the PRT  
22 with those contained within the Mental RFC (MRFC) Assessment:

01 The psychiatric review technique described in 20 CFR 404.1520a and 416.920a  
02 and summarized on the Psychiatric Review Technique Form (PRTF) requires  
03 adjudicators to assess an individual's limitations and restrictions from a mental  
04 impairment(s) in categories identified in the "paragraph B" and "paragraph C"  
05 criteria of the adult mental disorders listings. The adjudicator must remember  
06 that the limitations identified in the "paragraph B" and "paragraph C" criteria  
07 are not an RFC assessment but are used to rate the severity of mental  
08 impairment(s) at steps 2 and 3 of the sequential evaluation process. The mental  
09 RFC assessment used at steps 4 and 5 of the sequential evaluation process  
10 requires a more detailed assessment by itemizing various functions contained in  
11 the broad categories found in paragraphs B and C of the adult mental disorders  
12 listings in 12.00 of the Listing of Impairments, and summarized on the PRTF.

08 Social Security Ruling (SSR) 96-8p. The Commissioner states that, in this case, the ALJ  
09 appropriately followed the MRFC assessment of State agency consultant Dr. John Robinson,  
10 who opined: "Extended concentration may be interrupted but she can redirect her attention  
11 when needed. She retains the ability to do both [simple routine tasks] and complex." (AR 18,  
12 392.)<sup>3</sup>

13 Plaintiff fails to demonstrate error. The Commissioner accurately distinguishes the  
14 PRT and RFC assessments. Moreover, none of the case law cited by plaintiff supports her  
15 contention. In *Thomas*, 278 F.3d at 956, the Ninth Circuit concluded that, in directing a VE to  
16 credit the opinion of a medical expert who had just testified that the claimant had deficiencies of  
17 concentration, persistence, or pace, the ALJ adequately included the assessed limitation into the  
18 hypothetical. The Seventh Circuit's decision in *O'Connor-Spinner*, 627 F.3d at 617-20, is

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19  
20 3 Dr. Robinson included this opinion in the narrative portion of his report. See Program  
21 Operations Manual System (POMS) DI 25020.010 at B.1 ("The purpose of section I . . . on the  
22 [MRFCA] is chiefly to have a worksheet to ensure that the psychiatrist or psychologist has considered  
each of these pertinent mental activities and the claimant's or beneficiary's degree of limitation for  
sustaining these activities over a normal workday and workweek on an ongoing, appropriate, and  
independent basis. It is the narrative written by the psychiatrist or psychologist in section III . . . of [the  
MRFCA] that adjudicators are to use as the assessment of RFC.")

likewise distinguishable in that the error in that case lay in the ALJ's failure to include in the hypothetical a moderate limitation on concentration, persistence, or pace explicitly included in the RFC assessment.

The Eleventh Circuit and other circuit courts have considered and determined the relevance of limitations assessed in the PRT to the RFC assessment. *See, e.g., Winschel*, 631 F.3d at 1180 (“Though the PRT and RFC evaluations are undeniably distinct, *see* 20 C.F.R. §§ 404.1520a(d)(3), 416.920a(d)(3), nothing precludes the ALJ from considering the results of the former in his determination of the latter.”) (citing *Ramirez v. Barnhart*, 372 F.3d 546, 555 (3d Cir. 2004) (“While SSR 96-8p, does state that the [PRT] findings are ‘not an RFC assessment’ and that step four requires a ‘more detailed assessment,’ it does not follow that the findings on the [PRT] play no role in steps four and five, and SSR 96-8p, contains no such prohibition.”)) However, as the Eleventh Circuit recently confirmed: “[A]n ALJ’s hypothetical restricting the claimant to simple and routine tasks adequately accounts for restrictions related to concentration, persistence and pace where the medical evidence demonstrates that the claimant retains the ability to perform the tasks despite concentration deficiencies.” *Jarrett v. Comm’r of Soc. Sec.*, No. 10-13911, 2011 U.S. App. LEXIS 9621 at \*6-7 & n.1 (11th Cir. Apr. 11, 2011) (noting prior recognition of this finding in *Winschel*, 631 F.3d at 1180).

Similarly, the Ninth Circuit has found that “an ALJ’s assessment of a claimant adequately captures restrictions related to concentration, persistence, or pace where the assessment is consistent with restrictions identified in the medical testimony.” *Stubbs-Danielson v. Astrue*, 539 F.3d 1169, 1173-74 (9th Cir. 2008) (cited cases omitted). Further, while not directly addressing the relevance of PRT-assessed limitations to the RFC

01 assessment, the Ninth Circuit upheld a lower court decision finding no error in an RFC  
02 restriction to simple and repetitive tasks, despite a step two and three finding of moderate  
03 difficulties in maintaining concentration, persistence, or pace. *Sabin v. Astrue*, No. 08-35338,  
04 2009 U.S. App. LEXIS 12657 at \*5-7 (9th Cir. Jun. 12, 2009). The Court explained that the  
05 medical evidence supported the conclusion. *Id.*

06 In this case, the ALJ relied on the medical evidence in assessing plaintiff as able to  
07 perform simple and some detailed/complex tasks. As observed by the Commissioner, the ALJ  
08 gave significant weight to Dr. Robinson's opinion that plaintiff was able to perform simple  
09 routine tasks and complex tasks. (AR 18, 392.) She also gave significant weight to the  
10 opinion of examining physician Dr. David Sandvik, who found plaintiff able to sustain  
11 concentration and pace. (AR 16, 374.) The ALJ's assessment and corresponding  
12 hypothetical, therefore, adequately captured restrictions related to concentration, persistence, or  
13 pace. *Stubbs-Danielson*, 539 F.3d at 1173-74.

#### 14 Physicians' Opinions

15 In general, more weight should be given to the opinion of a treating physician than to a  
16 non-treating physician, and more weight to the opinion of an examining physician than to a  
17 non-examining physician. *Lester v. Chater*, 81 F.3d 821, 830 (9th Cir. 1996). Where not  
18 contradicted by another physician, a treating or examining physician's opinion may be rejected  
19 only for "clear and convincing" reasons. *Id.* (quoting *Baxter v. Sullivan*, 923 F.2d 1391,  
20 1396 (9th Cir. 1991)). Where contradicted, a treating or examining physician's opinion may  
21 not be rejected without "specific and legitimate reasons' supported by substantial evidence in  
22 the record for so doing." *Id.* at 830-31 (quoting *Murray v. Heckler*, 722 F.2d 499, 502 (9th Cir.



01 1983)).

02       The ALJ may reject physicians’ opinions “by setting out a detailed and thorough  
03 summary of the facts and conflicting clinical evidence, stating his interpretation thereof, and  
04 making findings.” *Reddick v. Chater*, 157 F.3d 715, 725 (9th Cir. 1998) (citing *Magallanes*,  
05 881 F.2d at 751). Rather than merely stating his conclusions, the ALJ “must set forth his own  
06 interpretations and explain why they, rather than the doctors’, are correct.” *Id.* (citing *Embrey*  
07 *v. Bowen*, 849 F.2d 418, 421-22 (9th Cir. 1988)).

08       Plaintiff avers that the ALJ erroneously evaluated the August 2007 opinions of  
09 consultative examiner Dr. Sandvik. Dr. Sandvik opined:

10       There was a considerable incongruence between her presentation and her verbal  
11 representations. At interview this day she did not appear depressed. She  
12 exhibited in formal testing no incapacity with regard to reasoning,  
13 understanding or memory. She appeared at interview able to sustain  
14 concentration and pace. She made multiple deflections from questions but  
15 there appeared to be a volitional aspect to this. She has marked difficulties with  
16 social interaction and often is in interpersonal conflict. In all of these she  
17 alleges that she is victimized. It is difficult from the perspective of psychiatry  
18 in terms of her formal mental status testing to find that she cannot work at this  
19 time. She does have problems with stress and approaches to her should include  
20 stress management and anger management (though she denies that she has an  
21 anger problem.) Antidepressant medication may be helpful for her. Therapy  
22 should focus also on interpersonal skill related issues and self-responsibility.  
She appears able to manage any funds granted her herself at this time.

18 (AR 374.) Plaintiff maintains that Dr. Sandvik opined as to “global” social limitations, while  
19 the ALJ recognized only social limitations pertaining to the public (AR 14, 71). She argues  
20 that the ALJ failed to provide legally sufficient reasons for implicitly rejecting Dr. Sandvik’s  
21 broader opinion as to social limitations, while maintaining that Dr. Sandvik’s opinions  
22 supported her decision. (AR 19.)

01 Plaintiff similarly avers that Dr. Robinson opined as to her global social limitations,  
02 finding, in August 2007, that she needed “limited public and interpersonal contact.” (AR 18,  
03 392.) Plaintiff maintains that the ALJ, therefore, also failed to provide legally sufficient  
04 reasons for rejecting Dr. Robinson’s opinion.

05 Plaintiff acknowledges that the ALJ addressed her ability to work with coworkers:

06 The claimant can have interactions with coworkers. The claimant testified that  
07 in 2007 she was going out dancing with friends. However, even considering an  
08 additional limitation of the need to work independently and with a small group  
of coworkers, the vocational expert testified that the claimant could still perform  
the past relevant work of maid/housekeeper and order picker.

09 (AR 19.) She argues, however, that these comments did not cure the defect. Plaintiff notes  
10 that the ALJ’s comments did not account for any deficits in social interactions with supervisors  
11 and maintains that the ALJ misstated the VE’s testimony. With respect to the latter point,  
12 plaintiff asserts that the VE never testified she could work as an order picker either as actually  
13 performed or as generally performed given the need to work with only a small group of  
14 coworkers, that she actually performed that job under those circumstances, or that, as generally  
15 performed, order pickers work in small groups of coworkers. (AR 73-74.) Plaintiff  
16 additionally asserts that the VE was unable to identify any jobs plaintiff could perform when  
17 asked about the vocational impact of an inability to work with co-workers. (AR 79.)

18 As argued by the Commissioner, plaintiff fails to demonstrate error in the ALJ’s  
19 assessment of the opinions of Drs. Sandvik and Robinson. After describing Dr. Sandvik’s  
20 report, the ALJ pointed to evidence in the record showing plaintiff “was getting out to the mall  
21 and shopping[,]” planned on attending a Halloween party, went boating on the river with  
22 friends, was able to use public transportation, visited with family and friends, and engaged in a

01 variety of activities with one particular friend, including assisting in taking care of pets, talking  
02 daily, going shopping and to appointments, running errands, and watching her play video  
03 games. (AR 17.) She thereafter gave significant weight to Dr. Sandvik's opinion that  
04 plaintiff could work, finding it consistent with the medical evidence of record. (AR 18.) It  
05 should also be noted that, while the ALJ did not discuss Dr. Sandvik's statement as to "marked  
06 difficulties with social interaction and . . . interpersonal conflict[,]" he also did not discuss Dr.  
07 Sandvik's statement that plaintiff "has some difficulty in social and other functioning, but she  
08 does have friends; she does have some meaningful interpersonal relationships and interests."  
09 (AR 373-74.)<sup>4</sup>

10 In addition, while the ALJ gave significant weight to Dr. Robinson's opinion, she  
11 likewise gave significant weight to a June 2008 MRFC assessment signed by Dr. Vincent  
12 Gollogly and finding plaintiff "could tolerate interaction with the general public and  
13 coworkers." (AR 18, 392, 704.) The ALJ subsequently and specifically clarified her finding  
14 that plaintiff could tolerate interactions with coworkers. Accordingly, the ALJ did provide  
15 reasons supported by substantial evidence, including the opinion of a reviewing physician, for  
16 rejecting a limitation in interacting with coworkers.

17 Plaintiff fails to cite evidence supporting a specific deficit in her ability to interact with  
18 supervisors. There is nothing in Dr. Sandvik's report explicitly supporting such a limitation  
19 (*see* AR 373-74), and the reports signed by Drs. Robinson and Gollogly found plaintiff not

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20 4 Although also not noted in the ALJ's decision, Dr. Sandvik assessed plaintiff's Global  
21 Assessment of Functioning (GAF) as 60, reflecting moderate symptoms or moderate difficulty in social,  
22 occupational, or school functioning, Diagnostic and Statistical Manual of Mental Disorders 34 (4th ed.  
2000) (DSM-IV-TR). Similarly, Dr. Robinson, in the checkbox portion of the form completed,  
assessed plaintiff as moderately limited in her ability to get along with coworkers. (AR 391.) *But see*  
POMS DI 25020.010 at B.1 (discussed *supra*, n. 3.)

01 significantly limited in her ability to accept instructions and respond appropriately to criticism  
02 from supervisors (AR 391, 703).

03 Because plaintiff fails to successfully challenge the ALJ's finding as to her social  
04 limitations, the Court need not address her remaining arguments as to the ALJ's discussion of  
05 her ability to perform her past work with the additional limitations of the need to work  
06 independently and with a small group of coworkers. However, in the interest of fully assessing  
07 all of the arguments raised, the Court addresses the issue below in the discussion of the ALJ's  
08 step four decision.

#### 09 Side Effects

10 Plaintiff points to her testimony that she experienced drowsiness and similar symptoms  
11 as side effects of her medications. (AR 52-54, 57, 297.) She maintains that substantial  
12 evidence does not support the RFC assessment, hypothetical to the VE, adverse credibility  
13 finding, or decision generally because the ALJ failed to evaluate the alleged side effects of her  
14 medication, and failed to set forth any express reason for rejecting her testimony on this point.  
15 In so doing, plaintiff relies on *Varney v. Secretary of HHS*, 846 F.2d 581, 585 (9th Cir. 1988).  
16 In that case, the Ninth Circuit recognized that medication side effects can significantly impact  
17 an individual's ability to work and held that, where an ALJ "chooses to disregard a claimant's  
18 testimony as to the subjective limitations of side effects, he must support that decision with  
19 specific findings similar to those required for excess pain testimony, as long as the side effects  
20 are in fact associated with the claimant's medication(s)." *Id. See also* 20 C.F.R. §§  
21 404.1529(c)(3)(iv), 416.929(c)(3)(iv) (ALJ must consider "type, dosage, effectiveness, and  
22 side effects of any medication" taken to alleviate pain or other symptoms); SSR 96-7p (same).

01 The Commissioner argues that it is not enough for plaintiff to simply allege medication  
02 side effects. Pointing to *Miller v. Heckler*, 770 F.2d 845, 849 (9th Cir. 1985), the  
03 Commissioner maintains that allegations of side effects from medications must be specific and  
04 clinically supported, and that because plaintiff failed to produce such evidence, the ALJ was not  
05 required to include alleged medication side effects in the RFC finding.

06 Plaintiff, in reply, asserts that while *Miller* upheld on substantial evidence review an  
07 ALJ's finding of no side effects when the claimant "produced no clinical evidence showing that  
08 narcotics use impaired his ability to work[,]" *id.*, it did not license a court to rely on that rational  
09 as an improper post hoc rationalization. She further denies that objective proof of a  
10 medication side effect is required as a matter of law, observing that the regulations categorize  
11 such effects as subjective, §§ 404.1529(c)(3)(iv), 416.929(c)(3)(iv), and expressly provide that  
12 objective evidence of the subjective is not required, §§ 404.1529(c)(2), 416.929(c)(2).

13 The ALJ did not explicitly state in the decision that she rejected plaintiff's testimony as  
14 to medication side effects. However, the decision clearly reveals that, as required by the  
15 regulations, the ALJ considered the testimony. (*See* AR 15.) The ALJ further rendered a  
16 detailed credibility assessment supporting her conclusion that plaintiff's statements concerning  
17 the intensity, persistence, and limiting effects of her symptoms were not credible to the extent  
18 inconsistent with the RFC assessed. For the reasons described below, reading the credibility  
19 assessment and decision as a whole, plaintiff fails to demonstrate reversible error in relation to  
20 the issue of medication side effects.

21 The ALJ discussed plaintiff's use of prescription medication in detail in the credibility  
22 assessment, as well as evidence of her use of marijuana, cocaine, opiates, and barbiturates.

01 (AR 17-18.) The discussion included one physician’s notation that plaintiff had not been  
02 truthful about her prescription drug use and another physician’s description of plaintiff as “a  
03 frequent flyer, [with] visits to the ER for pain medication” and as “probably . . . a, kind of, drug  
04 seeker[.]” (*Id.* (also describing incidents in which a prescription medication refill was denied,  
05 an early refill was made through emergency care, and where plaintiff was advised that an  
06 increase in dosage was not appropriate).) The ALJ found that plaintiff’s “drug-seeking  
07 behavior, continued marijuana use, and occasional drug use” undermined her credibility. (AR  
08 17.)

09 The ALJ had previously discussed improvements in plaintiff’s symptoms, including  
10 evidence of “good” energy and that “[h]er energy level was ‘finally getting better.’” (*Id.*)  
11 She also took into account plaintiff’s variety of activities, as described above, and found them  
12 consistent with an ability to work. (*Id.*) Considering these findings, and the ALJ’s  
13 subsequent consideration of the medical record, a clear inference can be drawn from the  
14 decision as to the ALJ’s rejection of plaintiff’s testimony as to the side effects of her  
15 medications. *See generally Magallanes*, 881 F.2d at 755 (an “incantation” of the “magic  
16 words, ‘I reject [a physician’s] opinion . . . because[.]’” is not required; the court may draw  
17 “specific and legitimate inferences from the ALJ’s opinion.”)

18 This case is clearly distinguishable from *Varney*, wherein the ALJ rejected a claimant’s  
19 subjective pain and symptom testimony with a single sentence: “The claimant’s reports of  
20 subjective symptoms and limitations are exaggerated over what is corroborated by the weight  
21 of the objective medical evidence, and to this extent, her reports are not credible.” 846 F.2d at  
22 584-85. In this case, the ALJ gave a number of clear and convincing reasons for rejecting

01 plaintiff's testimony as to the intensity, persistence, and limiting effects of her symptoms. Her  
02 failure to spell out the reasoning as it specifically related to the testimony regarding medication  
03 side effects does not constitute reversible error. *See Bayliss v. Barnhart*, 427 F.3d 1211, 1217  
04 (9th Cir. 2005) (finding no error in an ALJ's failure to explicitly address the drowsiness side  
05 effect of a claimant's medications where, "[i]n making his RFC determination, the ALJ took  
06 into account those limitations for which there was record support that did not depend on [the  
07 claimant's] subjective complaints."; "Preparing a function-by-function analysis for medical  
08 conditions or impairments that the ALJ found neither credible nor supported by the record is  
09 unnecessary.") (citing SSR 96-8p). *See also Roquemore v. Comm'r of SSA*, No. 08-56894,  
10 2010 U.S. App. LEXIS 4971 at \*2-3 (9th Cir. Mar. 9, 2010) ("Roquemore argues that the ALJ  
11 erred by failing to consider the side effects of his medications. However, Roquemore fails to  
12 identify any objective evidence of side effects. He points only to his own subjective claims of  
13 drowsiness and decreased concentration. Nothing in the record suggests that Roquemore's  
14 ability to work was affected by his medications. Therefore, the ALJ was not required to include  
15 a discussion of side effects.")

#### 16 Step Four

17 Plaintiff avers that the ALJ was required by SSR 96-8p to make a function-by-function  
18 comparison of the demands of her past relevant work as she actually performed it with her RFC,  
19 and failed to do so in this case. She further avers that the ALJ failed to determine the mental or  
20 physical demands of her past relevant jobs as either actually or generally performed, as required  
21 by SSR 82-62.

22 RFC is the most a claimant can do considering his or her limitations or restrictions.

01 SSR 96-8p. In assessing a claimant's RFC, the ALJ must identify plaintiff's functional  
02 limitations or restrictions, and assess her work-related abilities on a function-by-function basis,  
03 including a required narrative discussion. See 20 C.F.R. §§ 404.1545, 416.945; SSR 96-8p.

04 Although plaintiff bears the burden at step four, the ALJ retains a duty to make factual  
05 findings to support her conclusion, including a determination of whether a claimant can  
06 perform the actual demands and job duties of her past relevant work *or* the functional demands  
07 and job duties of the occupation as generally performed in the national economy. *Pinto v.*  
08 *Massanari*, 249 F.3d 840, 844-45 (9th Cir. 2001) (citing SSR 82-61). "This requires specific  
09 findings as to the claimant's [RFC], the physical and mental demands of the past relevant work,  
10 and the relation of the [RFC] to the past work." *Id.* (citing SSR 82-62). A determination as to  
11 a claimant's ability to perform past relevant work "must be developed and explained fully in the  
12 disability decision[,]" and "every effort must be made to secure evidence that resolves the issue  
13 as clearly and explicitly as circumstances permit." SSR 82-62.

14 An ALJ may rely on two sources "to define a claimant's past relevant work as actually  
15 performed: a properly completed vocational report, SSR 82-61, and the claimant's own  
16 testimony, SSR 82-41." *Pinto*, 249 F.3d at 845. The Dictionary of Occupational Titles  
17 (DOT) is generally considered the best source for determining how past relevant work is  
18 generally performed. *Id.* at 845-46.

19 In this case, the ALJ determined that plaintiff could perform a full range of work at all  
20 exertional levels, limited only by the specific nonexertional limitations described above. (AR  
21 14.) She thereafter stated that, in comparing plaintiff's RFC with the physical and mental  
22 demands of her past relevant work as a maid/housekeeper and order picker, plaintiff could



01 perform those jobs as actually and generally performed. (AR 19 (also stating that the jobs did  
02 not require the performance of work-related activities precluded by the RFC).)

03 Plaintiff does not establish the ALJ's failure to comply with SSR 96-8p, which  
04 addresses the assessment of a claimant's RFC, as opposed to the assessment of an individual's  
05 ability to perform past relevant work, as is addressed in SSR 82-62.<sup>5</sup> However, the ALJ's  
06 decision does not include a finding of fact as to the physical and mental demands of plaintiff's  
07 past relevant work as an order picker, or otherwise contain what could reasonably be construed  
08 as a full explanation as to claimant's ability to perform that past relevant work. The ALJ,  
09 therefore, failed to comply with the requirements of SSR 82-62.

10 The Commissioner, citing *Lockwood v. Comm'r SSA*, 616 F.3d 1068, 1071-72 (9th Cir.  
11 2010), avers that "a regulatory requirement to consider an issue does not impose a duty to  
12 provide a detailed explanation of that consideration[.]" and that "[m]entioning and deciding the  
13 issue is sufficient." (Dkt. 22 at 14.) Yet, there is nothing in *Lockwood* to support the  
14 proposition that an ALJ, or this Court, may ignore the applicable SSRs. See 616 F.3d at  
15 1071-73 (discussing a plaintiff's arguments related to internal SSA policy and guidance  
16 contained in the Commissioner's Hearings, Appeals, and Litigation Manual ("HALLEX") and  
17 Program Operations Manual System ("POMS"), and finding no basis for plaintiff's claim that  
18 the ALJ failed to comply with the applicable regulations).

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19 <sup>5</sup> SSR 96-8p does note that, because the first step four consideration is whether a claimant can  
20 perform past relevant work as actually performed, the RFC may not be expressed initially in terms of  
21 broad exertional categories (i.e. "sedentary" or "light" work). It goes on to state that RFC may be  
22 thereafter expressed in those terms "if it becomes necessary to assess whether an individual is able to do  
his or her past relevant work as it is generally performed in the national economy." SSR 96-8p. It is  
not clear, however, that SSR 96-8p requires a "function-by-function *comparison* of the demands of a  
claimant's past relevant work as actually performed with his or her [RFC,]" as argued by plaintiff.  
(Dkt. 18 at 13; emphasis added.)

01 SSRs are issued by the Commissioner to clarify the Commissioner's regulations and  
02 policies. *Bunnell v. Sullivan*, 947 F.2d 341, 346 n.3 (9th Cir. 1991). Although they do not  
03 have the force of law, they are nevertheless given deference "unless they are plainly erroneous  
04 or inconsistent with the [Social Security] Act or regulations." *Han v. Bowen*, 882 F.2d 1453,  
05 1457 (9th Cir. 1989). The Commissioner fails to demonstrate any basis on which the Court  
06 could reasonably conclude that the ALJ was not required to consider the SSR requirements in  
07 relation to plaintiff's past relevant work.

08 However, this matter need not be remanded on this issue. That is, the question remains  
09 as to whether the ALJ's error in failing to address the demands of plaintiff's past relevant work  
10 can be deemed harmless. *See Carmickle v. Commissioner, Soc. Sec. Admin.*, 533 F.3d 1155,  
11 1162-63 (9th Cir. 2008) (where the ALJ provides specific reasons supporting an assessment and  
12 substantial evidence supports the conclusion, an error in the assessment may be deemed  
13 harmless; the relevant inquiry "is not whether the ALJ would have made a different decision  
14 absent any error, . . . [but] whether the ALJ's decision remains legally valid, despite such  
15 error.") (citing *Batson v. Comm'r of Soc. Sec. Admin.*, 359 F.3d 1190, 1195-97 (9th Cir. 2004))  
16 and *Stout v. Commissioner, Soc. Sec. Admin.*, 454 F.3d 1050, 1055 (9th Cir. 2006) (recognizing  
17 application of harmless error in Social Security context where a "mistake was nonprejudicial to  
18 the claimant or irrelevant to the ALJ's ultimate disability conclusion.")

19 At hearing, the VE testified she had reviewed the records regarding plaintiff's work  
20 history and heard plaintiff's testimony. (AR 70.) Although plaintiff did not testify as to the  
21 work she performed as an order picker (*see* AR 33-39 and 55-56), the record contained a  
22 vocational report she completed regarding that job (AR 201, 204). The VE identified and

01 described the jobs performed by plaintiff within the prior fifteen years by exertional level, skill  
02 level, and DOT number. (AR 70-71.) The VE thereafter testified that plaintiff performed the  
03 jobs identified as they are generally performed in the national economy, confirmed the  
04 consistency of her testimony with the DOT, and opined that plaintiff, with the limitations as  
05 assessed in the RFC, would be able to perform several of those jobs, including the job of order  
06 picker. (AR 70-73.)

07 Although not explicitly stated as such in the decision, it is apparent that the ALJ relied  
08 on the VE's testimony in concluding plaintiff could return to her past relevant work. An ALJ  
09 may properly rely on the testimony of a VE in rendering a step four decision. *See Bayliss*, 427  
10 F.3d at 1217-18 ("A VE's recognized expertise provides the necessary foundation for his or her  
11 testimony. Thus, no additional foundation is required.") As described above, plaintiff fails to  
12 demonstrate error in the ALJ's assessment of the medical record or her RFC, and, therefore, in  
13 the corresponding hypothetical offered to the VE. Accordingly, plaintiff does not demonstrate  
14 how the VE's testimony could not be construed as substantial evidence supporting the ALJ's  
15 step four decision. As such, remanding this matter on this issue would arguably serve only the  
16 purpose of requiring the ALJ to insert the VE testimony as to plaintiff's past relevant work and  
17 her reliance on that testimony into the decision. However, because the Court finds a remand of  
18 this matter appropriate for the reason stated below, on remand, the ALJ should render a clear  
19 finding of fact as to the physical and mental demands of plaintiff's past relevant work as an  
20 order picker.

21 As indicated above, plaintiff fails to establish error in the ALJ's assessment of her social  
22 limitations. The Court nonetheless here briefly addresses plaintiff's arguments as to the ALJ's

01 conclusion that the VE's testimony supported a finding that plaintiff could perform her past  
02 relevant work as an order picker even considering additional limitations of the need to work  
03 independently and with a small group of coworkers. (AR 19.)

04 The VE testified as follows:

05 Q If the person were limited as far as working only with – either working  
06 independently and in an environment where there's just a small group of  
coworkers, would they be able to perform that job?

07 A . . . The order picker job, it really depends upon the size of the  
08 warehouse, I suppose. The individual would go out and would pick certain  
09 orders based on whatever sheets were given the worker, and then that worker  
would go and search for those particular items. Working as a team is not  
necessarily required to do that job, but there is going to be coworkers in the  
general area.

10 Q Are there some warehouse that are larger than others? Some that may  
11 have more employees –

12 A. Yes, there are. And it would be very difficult for me to estimate  
13 numbers.

14 (AR 73-74; the VE also stated it would be “nearly impossible” to specify the numbers of large  
15 versus smaller warehouses given the “variations between employers and the economy.”)

16 Later, when asked whether plaintiff could perform the jobs identified if required “some kind of  
17 a structured setting where they wouldn't be working with any people[,]” the VE testified:

18 . . . These jobs do not require teamwork, as I explained to the judge. However,  
19 there is going to be coworkers around. If a person required a situation where  
20 there was absolutely no one around, these jobs would not be accommodated in  
that way. And in fact, I can't honestly think of any job that would be  
accommodated. Even if we went to a sheltered workshop, there's still going to  
be individuals in the area.

21  
22 (AR 79.)

01 Again, the VE indicated she based her testimony on consideration of both plaintiff's  
02 testimony and the record, which included plaintiff's vocational report, and opined that,  
03 consistent with the DOT, plaintiff performed the jobs identified as they are generally performed  
04 in the national economy. The vocational report plaintiff completed does not include any  
05 details regarding the social aspects of the order picker job, beyond the fact that she did not  
06 supervise anyone and was not a lead worker. (AR 201, 204.) Yet, "[t]he claimant is the  
07 primary source for vocational documentation, and statements by the claimant regarding past  
08 work are generally sufficient for determining the skill level, exertional demands and  
09 nonexertional demands of such work." SSR 82-62.

10 In any event, even assuming an absence of sufficient information to support the  
11 conclusion that plaintiff could perform the order picker job as she actually performed it in terms  
12 of additional social limitations, an ALJ need not render "explicit findings at step four regarding  
13 a claimant's past relevant work both as generally performed *and* as actually performed."  
14 *Pinto*, 249 F.3d at 845 (emphasis in original). In this case, plaintiff fails to establish that,  
15 because the VE clarified that some order picker jobs would employ more people than others and  
16 was unable to provide specific numbers of "larger versus the smaller warehouses" (73-74), the  
17 ALJ lacked support for his conclusion that plaintiff could perform the order picker job as it was  
18 generally performed. The VE testified that, while there would be coworkers in the general  
19 area while working as an order picker, the job did not necessarily require teamwork, and there  
20 would be employers employing only a small number of employees. (AR 73, 79.) The ALJ's  
21 finding that the VE's testimony supported the conclusion that plaintiff could still perform the  
22 order picker job if she were limited to working independently and with a small group of

01 coworkers can be deemed a rational interpretation of the evidence.<sup>6</sup>

02 Knee Condition

03 Plaintiff maintains that the ALJ materially misstated the record in addressing her knee  
04 condition. The ALJ stated:

05 The claimant also has some reported knee problems from October 2007 through  
06 November 2007 related to a falling incident. On physical examination in  
07 November 2007, the claimant was in no acute distress. There was no obvious  
08 effusion in either knee. She had full range of motion bilaterally. X-rays were  
within normal limits. The claimant received a diagnosis of bilateral knee pain  
status post acute contusion. There are no other knee related complaints in the  
record and the claimant did not testify that she had any knee problems.

09 (AR 13.)

10 Plaintiff points to a May 2008 treatment note for left-knee pain in which Dr. Brent Thiel  
11 advised plaintiff that her symptoms would “likely be exacerbated with stairs or ambulating on  
12 inclines[,]” and prescribed a cane. (AR 951.)<sup>7</sup> Plaintiff also notes an August 2008 physical  
13 therapy progress note reflecting treatment for chronic knee pain, left greater than right. (AR  
14 938-40 (noting plaintiff “states that she uses a cane when walking long distance”).)

15 Pointing to SSR 96-9p, plaintiff asserts that the use of a cane impedes the performance  
16 of even sedentary work.<sup>8</sup> She maintains that the ALJ erred in failing to evaluate the evidence

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18 6 The Court notes that, while the ALJ “may rely on the general job categories of the [DOT] . . .  
19 as presumptively applicable to a claimant’s prior work[,]” the claimant “may overcome the presumption  
20 that the [DOT’s] entry for a given job title applies to him by demonstrating that the duties in his  
particular line of work were not those envisaged by the drafter of the category.” *Villa v. Heckler*, 797  
F.2d 794, 798 (9th Cir. 1986) (internal citations omitted). In this case, plaintiff failed to provide any  
evidence overcoming the presumption.

21 7 These records, described by the ALJ as the best possible copies available, are very difficult to  
22 read. However, plaintiff appears to accurately reproduce the statements quoted above.

8 SSR 96-9p states:

01 of her 2008 treatment, assessed limitations, and prescription of a cane. *See Universal Camera*  
02 *Corp. v. NLRB*, 340 U.S. 474, 488 (1951) (“The substantiality of evidence must take into  
03 account whatever in the record fairly detracts from its weight.”); 20 C.F.R. §§ 404.1527(d)(2),  
04 416.927(d)(2) (requiring consideration of treating physician’s opinion); SSR 06-3p (requiring  
05 consideration of opinions from “other sources”); SSR 96-8p (“In all cases in which symptoms,  
06 such as pain, are alleged, the RFC assessment must . . . [c]ontain a thorough discussion and  
07 analysis of the objective medical and other evidence[.]”)

08 Plaintiff concedes that she did not address her knee condition at hearing. However, she

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09 To find that a hand-held assistive device is medically required, there must be medical  
10 documentation establishing the need for a hand-held assistive device to aid in walking  
11 or standing, and describing the circumstances for which it is needed (i.e., whether all the  
12 time, periodically, or only in certain situations; distance and terrain; and any other  
13 relevant information). The adjudicator must always consider the particular facts of a  
case. For example, if a medically required hand-held assistive device is needed only for  
prolonged ambulation, walking on uneven terrain, or ascending or descending slopes,  
the unskilled sedentary occupational base will not ordinarily be significantly eroded.

14 Since most unskilled sedentary work requires only occasional lifting and carrying of  
light objects such as ledgers and files and a maximum lifting capacity for only 10  
15 pounds, an individual who uses a medically required hand-held assistive device in one  
hand may still have the ability to perform the minimal lifting and carrying requirements  
16 of many sedentary unskilled occupations with the other hand. For example, an  
individual who must use a hand-held assistive device to aid in walking or standing  
17 because of an impairment that affects one lower extremity (e.g., an unstable knee), or to  
reduce pain when walking, who is limited to sedentary work because of the impairment  
affecting the lower extremity, and who has no other functional limitations or  
18 restrictions may still have the ability to make an adjustment to sedentary work that  
exists in significant numbers. On the other hand, the occupational base for an individual  
19 who must use such a device for balance because of significant involvement of both  
lower extremities (e.g., because of a neurological impairment) may be significantly  
eroded.

20 In these situations, too, it may be especially useful to consult a vocational resource in  
21 order to make a judgment regarding the individual’s ability to make an adjustment to  
other work.

01 notes that she earlier mentioned her knee condition (AR 249 and 252), and that the ALJ did not  
02 inquire about the condition at the hearing. She argues that, as a result of the ALJ's failure to  
03 adequately address her knee condition, substantial evidence does not support the ALJ's finding  
04 that she could perform work at all exertional levels during all twelve-month periods from the  
05 alleged onset date (March 1, 2006) through the date of the decision (April 16, 2010). See 20  
06 C.F.R. §§ 404.1509 & 416.909 (describing twelve-month duration requirement).

07 The Commissioner responds that plaintiff bore the burden of establishing a severe knee  
08 impairment preventing her from performing substantial gainful activity and which lasted or was  
09 expected to last for a period of twelve months. 42 U.S.C. § 423(d)(1)(A); 20 C.F.R. §§  
10 404.1505, 404.1509, 416.905, 416.909; *Roberts v. Shalala*, 66 F.3d 179, 182 (9th Cir. 1995).  
11 Also, an impairment will only be found severe if it "significantly limits" a claimant's ability to  
12 perform basic work activities, 20 C.F.R. §§ 404.1520(c), 416.920(c), and a claimant for  
13 disability benefits must bring to the Commissioner's attention everything showing she is  
14 disabled, 20 C.F.R. §§ 404.1512(a) & (c), 416.912(a) & (c).

15 The Commissioner notes the ALJ's questioning at hearing as to the problems that  
16 prevented plaintiff from working, and maintains that the ALJ reasonably inferred from  
17 plaintiff's silence that her knee problems had resolved and did not last the requisite  
18 twelve-month duration. (See AR 42.) He additionally takes note of statements in the May  
19 2008 treatment note that 2007 studies of plaintiff's knees "were largely benign[.]" and that her  
20 "right knee discomfort has completely resolved[.]" while she continued "to get some recurrent  
21 popping and aching from the anterolateral aspect of the left knee." (AR 950.) Also, on  
22 examination, plaintiff presented with a "fully weightbearing, nonantalgic gait[.]" some very



01 minimal discomfort with patellofemoral compression[,]” “good active range of motion[,]” and  
02 “[g]ood 5/5 extensor and flexor strength.” (AR 951.) The Commissioner observes the  
03 absence of subsequent records showing a continuing knee problem or the continued need for  
04 use of a cane, and plaintiff’s own testimony that she only stopped going dancing in 2007 or  
05 2008 (AR 50-51).

06         Given the ALJ’s statement that there were no other knee related complaints in the record  
07 beyond those dated in 2007, it is apparent she failed to consider the May 2008 treatment note  
08 from Dr. Thiel and subsequent physical therapy progress note. Also, while plaintiff did not  
09 testify as to any knee problems in the January 2010 hearing, she accurately notes her  
10 identification of knee problems in a February 2008 Disability Report. (AR 249 (in answering  
11 a question as to how her impairments limited her ability to work, claimant stated: “Claimant  
12 has limitations involved with physical basic work activities as it relates to using her knees, she  
13 is currently recovering from injury sustained to her knees from a fall.”) and AR 252 (plaintiff  
14 described October 2007 records from Dr. Miller for a consultation on her knee and stated she  
15 received treatment in the form of “possible left knee surgery and physical therapy”).) The  
16 ALJ’s failure to address the 2008 evidence, and particularly any need for the use of a cane, calls  
17 both the ALJ’s step two and step four decisions into question. *See Smolen v. Chater*, 80 F.3d  
18 1273, 1290 (9th Cir. 1996) (an impairment or combination of impairments can be found ‘not  
19 severe’ only if the evidence establishes a slight abnormality that has ‘no more than a minimal  
20 effect on an individual’s ability to work.’”) (quoting SSR 85-28) and 20 C.F.R. §§ 404.1545(e),  
21 416.945(e); SSR 96-8p (ALJ must consider the limiting effects of all of plaintiff’s impairments,  
22 including those that are not severe, in determining a claimant’s RFC).

01 The August 2008 physical therapy note is the latest dated document in the record  
02 addressing plaintiff's knee problems, and reflects plaintiff's report that her knee symptoms had  
03 not changed since onset, in October 2007. (AR 938.) The Commissioner, therefore, raises a  
04 legitimate question as to whether the evidence relating to plaintiff's knee condition satisfies the  
05 twelve-month durational requirement. 20 C.F.R. §§ 404.1509 & 416.909. However, it is not  
06 clear what conclusion the ALJ would have reached on this issue had she been aware of the later  
07 evidence of plaintiff's knee problems. Accordingly, on remand, the ALJ should consider all of  
08 the evidence in the record in assessing the severity of plaintiff's knee-related impairments,  
09 including both the 2008 medical evidence and plaintiff's February 2008 statements as to  
10 knee-related limitations.

11 **CONCLUSION**

12 For the reason set forth above, this matter should be REMANDED for further  
13 administrative proceedings.

14 DATED this 1st day of July, 2011.

15  
16 

17 Mary Alice Theiler  
18 United States Magistrate Judge  
19  
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21  
22